

XML Implementation Guide

Document Revision Date: December 17, 2010

Version Number: 8

Table of Contents

Why XML	3
What is XML	3
The XML Document	3
Document Type Definition	4
Processors and Parsers	4
Style Sheets	
Additional Information on XML	
Prerequisites for using the NYS DOS Bulk XML Filing System	5
Testing	
Establishing a Drawdown Account	
Establishing a permanent Client ID, password, and Client Account Number	
If you have questions or comments about the UCC services, please contact: UCC	6
The New York State Department of State XML Web Application	
How to access to the application	
Browser Prerequisite	7
Login Page	
Upload Page	7
Processing Page	7
Status/Download Page	
Hours of XML operation	
Disclaimer	8
File Guidelines	
File Size	
File Name	
Specifying the DTD in the XML Data File	
Reserved Characters	10
Elements with No Data	
County and Co-op Filings	
Contact Info(click on the link below)	
Fee for Electronic Filing	
Addendum Form with XML Tags	
Amendment Form with XML Tags	
Amendment Addendum with XML Tags	
New York State Document Type Definition (DTD)	
XML Document Overview	
Assumptions about the Detailed XML Document Specifications	19
Detailed XML Document Specifications	
XML Sample – Initial Filing	
XML Sample – Amendment Filing	
APPENDIX A	
APPENDIX B	
APPENDIX C	
APPENDIX D	66

Why XML

In 1998, significant revisions were made to Article 9 of the Uniform Commercial Code to modernize filing practices by encouraging e-commerce and provide a more efficient filing environment. In order to support the filing environment established by Article 9 revisions, significant changes have been made to the way financing statement information will be maintained and disseminated. The Department has developed an information system to support these changes.

In order to comply with the National Uniform Commercial Code model, the New York State Department of State (NYS DOS) will allow submission of bulk electronic filings using the XML eXtensible Markup Language (XML) standard. It is anticipated that high volume financial institutions and service companies will use this service.

The New York State Department of State will allow constituents to utilize this capability only after they establish a draw down account, are assigned a Client ID and password, and have conducted transmission testing. How-to instructions for these items will be provided in subsequent sections of this document. The Department will receive, process, and return XML documents using established communication protocols and XML record set formats.

What is XML

Extensible Markup Language (XML) is an open-standards-based technology, adopted by the World Wide Web Consortium (W3C). It provides standardized rules for marking up documents so they can be shared on the Internet by allowing data exchange across varied platforms and applications. Like HTML, XML is an abbreviated derivative of Standard Generalized Markup Language (SGML), the internationally agreed-upon standard meta-language.

There are four principle components that enable XML applications to process an XML document:

- The XML Document
- Document Type Definitions (DTD) or Schemas
- Processors and Parsers
- Style Sheets

The XML Document

Like HTML, XML makes use of tags (words bracketed by '<' and '>') and attributes (of the form name="value"), but while HTML specifies what each tag and attribute means (and often how the text between them will look in a browser), XML uses the tags only to delimit pieces of data, and leaves the interpretation of the data completely to the application that reads it. The following is a simple "business card" XML document:

Document Type Definition

A Document Type Definition (DTD) is a formal description in XML Declaration Syntax of a particular type of document. It sets out what names are to be used for the different types of elements, where they may occur, and how they all fit together. A DTD provides applications with advance notice of what names and structures can be used in a particular document type. Using a DTD when editing files means you can be certain that all documents which belong to a particular type will be constructed and named in a consistent way. The current version of the DTD in use by the NYS DOS is 1.0.

Processors and Parsers

The XML processor, usually embedded in the application used to view the XML document, checks to make sure the XML file or document follows all the rules defined in the DTD. This means the document has only one root element, all tags have matching start and closing tags, and there is no overlapping of tags.

Validating parsers read the DTD before they read the XML document so that they can identify where every element type should appear and how each relates to the other, so that applications which need to know this in advance (editors, search engines, navigators, and databases) can set themselves up correctly.

Style Sheets

A style sheet is used to read the XML document and then associate the custom tags with particular display or presentation properties.

Additional Information on XML

The following sites contain valuable information regarding the XML standard and the UCC XML standard, as well as some information concerning XML tools.

http://www.w3.org/XML/

http://www.iaca.org/xml

http://www.xml.org/

http://msdn.microsoft.com/xml/default.asp

http://www.xml.com/

Prerequisites for using the NYS DOS Bulk XML Filing System

Anyone can submit UCC documents using our XML Web Application, however, there are a few prerequisites that must be met:

- 1. A Test batch (document) must be submitted, processed, and acknowledged
- 2. A Drawdown Account must be established
- 3. A permanent Client ID, password, and client account must be assigned.

Testing

Trading partners will be required to pass a transmission test prior to submitting production documents utilizing the NYS DOS Bulk XML Filing System. The purpose of this test is to ensure compliance with applicable standards established by the NYS DOS as well as assuring success of trading partner's production transmissions.

To initiate a test, contact the NYS DOS UCC Customer Service during normal business hours. A representative will collect some basic information such as name and address and provide you with further details regarding the test. The creation of the test batch will be the responsibility of the client. This test batch must include the test indicator by placing the word "No" in the element "Test" and will be emailed to the NYS DOS UCC Customer Service. The batch will be submitted for processing in a test environment. Upon completion of processing, test acknowledgment data will be created and packaged for the client to review. Clients will receive the acknowledgment data via email. Please note, test data will not be permanently stored in the database nor will an image be created during this test phase.

Establishing a Drawdown Account

A Drawdown Account must be established by completing an "Application to Establish a Drawdown Account." The completed form must be submitted along with a minimum start up deposit of \$100.

The Application to Establish a Drawdown Account can be found in <u>Drawdown Account Application (66.0 PDF</u> form (1 page)), or may be obtained by contacting **NYS DOS UCC Customer Service**.

A Drawdown (or pre-paid) account is an account established with the NYS DOS UCC Division at the request of a filer (sometimes referred to as a trading partner) who will be conducting business with the UCC Division on an ongoing basis. These accounts are similar in function to a debit account and are used solely for the purpose of paying the processing fees associated with the filing of UCC documents. The processing fee for each filing submitted will be deducted directly from the filer's Drawdown account.

It is incumbent on the Trading Partner to be sure that there are sufficient funds in their Drawdown account to process the filings submitted. Batch filings submitted which do not have sufficient fees to cover the costs associated with the entire batch of filings will not be processed, and the message "Failure to provide sufficient filing fees" will be provided in the filing acknowledgment.

Drawdown accounts should be replenished regularly by check, money order, or credit card. If paying by check, your 2-digit account number and the wording "UCC Drawdown" should be indicated. A request to deposit the funds from the check into your UCC Drawdown account should be clearly stated or documented upon submission. Checks must be made payable to Department of State and mailed to New York State Department of State, Uniform Commercial Code Division, Albany NY 12231-0001.

The Department of State's Uniform Commercial Code Division accepts MasterCard, Visa and American Express for the payment of certain fees.

The Credit Card Authorization Form can be found in <u>Credit Card Authorization Form</u>, or may be obtained by contacting the <u>NYS DOS UCC Customer Service</u> or by accessing the NYS DOS web site at www.dos.state.ny.us/corp/creditcard.html.

To pay for a fee by using your credit card, simply complete and sign the <u>Credit Card Authorization Form</u> (1 page 125KB) and submit it to the Uniform Commercial Code Division with your request. You may fax a document submitted for filing to the Uniform Commercial Code Division at (518) 474-4478.

You can download the approved forms from the NYS DOS site by going to the section called: UCC Forms.

Establishing a permanent Client ID, password, and Client Account Number

Once the establishment of the drawdown account and the successful test transmission has been completed, a permanent Client ID, password, and Client Account Number will be assigned. The NYS DOS UCC XML website address and the name and location of the DTD will also be supplied. To change or reset a password for an existing Client ID, contact the **NYS DOS UCC Customer Service**.

Frequently Asked Questions

If you have questions or comments about the UCC services, please contact: UCC

The New York State Department of State XML Web Application

How to access to the application

Upon successful completion of the prerequisites for using the NYS DOS Bulk XML Filing System, the web address will be supplied.

Browser Prerequisite

Accessing the application requires version 4.x or greater of either Internet Explorer or Netscape Navigator.

Login Page

Trading partners will be required to log into the application using a Client ID and password, which will establish a secured connection and validate the trading partner's identity. A maximum of three login attempts will be allowed to correctly enter the ID and password. After three failed attempts, a message will be displayed to contact the NYS DOS UCC Customer Service for assistance during normal business hours. After the third failed attempt, the trading partner will not be able to attempt another login until they contact Customer Service to have their password reset. Trading partners will only have access to their own account information once logged in.

NOTE: Only one person at a time should log into the application using the Client ID and password.

FAQ

A list of frequently asked questions will be provided to answer questions and provide online documentation.

Upload Page

The upload page will allow trading partners to browse their PC, select a file, which has been formatted as an XML document that contains UCC filings, and submit this file to the New York State Department of State (NYS DOS).

Processing Page

Once the XML document has been successfully received it will be validated. The following is a summary of the validation process:

- Step 1 Parse the Document and check that the document is well-formed.
- Step 2 Validate the Parsed Document against the DTD.
- Step 3 Verify that the ClientAccountNum in the XML document corresponds to the Client ID.
- Step 4 Check PacketNum to be sure it is unique for the day to prevent accidental duplicate submissions
- Step 5 Check data elements to be sure they do not exceed maximum lengths.
- Step 7 Check for required data elements (ClientAccountNum, PacketNum, ContactEmail, SeqNumber, Test, TransType)
- Step 8 Check that values of particular elements comply with the Detailed XML Document Specification (Pages 20-35).

During validation, descriptive messages will appear on the Processing page to provide the status of processing.

NOTE: If the document fails ANY of these validations, the \underline{ENTIRE} batch file will NOT be accepted.

If errors are detected, Error messages will be displayed on the processing page to assist the trading partner in identifying the problem so that the document can be corrected and resubmitted.

If no errors are detected, statistics will then be provided to indicate the number of filings forwarded to the state system for processing.

If state filings pass the validations, have been processed, and an acknowledgment has been generated, the following message will be displayed:

Final Acknowledgment XML Generated. You may download your response file.

Status/Download Page

Once a response file has been generated as described in the previous section, it will be available for download on the Status/Download Page. This response file or acknowledgment will contain the filing number and filing date if the filing was accepted by the NYS DOS, or the date and time the filing would have been filed and the rejection description if the filing was rejected by the NYS DOS. The trading partner can choose to either download this acknowledgment, or have it emailed to them. If the email option is selected, the acknowledgment will be sent to the email address provided in the XML document.

It is the responsibility of trading partners to check the status download page FOR EACH AND EVERY BATCH containing state filings to make sure that the batch has been processed and acknowledged. This will safeguard the trading partner in the unlikely event that a batch might be uploaded but not processed because of a severed connection.

Acknowledgments will be available for download online for five days.

Hours of XML operation

The XML website is available for submission and processing of filings seven days a week from 6:00 a.m. through 11:30 p.m.

Disclaimer

The NYS DOS Bulk XML Filing System is offered for use on an "AS IS" basis. The New York State Department of State ("NYS DOS") makes NO WARRANTY OF MERCHANTABILITY, NO WARRANTY OF FITNESS FOR ANY PARTICULAR PURPOSE, AND NO OTHER WARRANTY, GUARANTY OR REPRESENTATION OF ANY KIND OR DESCRIPTION, EXPRESS OR IMPLIED, with regard to the NYS DOS Bulk XML Filing System, or any equipment or software now or hereafter used as part of, or in connection with, or incidental to, the NYS DOS Bulk XML Filing System. In particular, but not by way of limitation, NYS DOS makes no warranty, guaranty or representation regarding (1) the times when the NYS DOS Bulk XML Filing System will be available to accept filings, or (2) the suitability of any system, equipment or software for use in transmitting records to the NYS DOS Bulk XML Filing System, or (3) the time it will take to accomplish a filing using the NYS DOS Bulk XML Filing System, or (4) the accuracy with which the information contained in any record that any person or entity transmits or attempts to transmit to the NYS DOS Bulk XML Filing System will be received, processed, stored or reflected. NYS DOS shall not be deemed to have made any such warranty, guaranty or representation by reason of (1) making the NYS DOS Bulk XML Filing System available, or (2) making any addition or change to, or replacement of, all or any part of the NYS DOS Bulk XML Filing System, or (3) preparing or disseminating the NYS Department of State XML Implementation Guide or any updated or revised version of such XML Implementation Guide, or (4) accepting, processing or acknowledging any test batch, establishing any drawdown account, issuing or assigning any client ID, password or client account, or otherwise authorizing or permitting any Trading Partner or any other person or entity to use or attempt to use the NYS DOS Bulk XML Filing System.

In no event shall NYS DOS be liable to any Trading Partner, or to any person or entity named in any record that any person or entity transmits or attempts to transmit to the NYS DOS Bulk XML Filing System, or to any other person or entity, for any failure to perfect (or to make a public record of) any security interest or other lien or interest of any kind or description, or for any loss of priority of any security interest or other lien or interest

of any kind or description, or for any loss or corruption of data, or for any lost revenue, or for any incidental, consequential, special, punitive, exemplary or other damages of any kind or description, foreseen or unforeseen, or for any cost or expense (including but not limited to attorneys' fees), resulting from or by reason of (1) the unavailability of the NYS DOS Bulk XML Filing System at any time or from time to time, without regard to whether such unavailability is due to mechanical, electronic or communications failure, or scheduled or unscheduled maintenance or testing, or any other cause, or (2) the inability of any system, equipment or software to transmit all or any part of any record to the NYS DOS Bulk XML Filing System, or (3) any failure to file, or any delay in filing, all or any part of any record that any person or entity transmits or attempts to transmit to the NYS DOS Bulk XML Filing System, or (4) any inaccuracy in the manner in which all or any part of any record that any person or entity transmits or attempts to transmit to the NYS DOS Bulk XML Filing System is received, processed, stored or reflected, or (5) any addition or change to, or replacement of, all or any part of any system, equipment or software used to transmit records to the NYS DOS Bulk XML Filing System that is necessitated by any change or addition to, or replacement of, all or any part of the NYS DOS Bulk XML Filing System, or (6) any other matter related to any use or attempted use of the NYS DOS Bulk XML Filing System.

File Guidelines

File Size

Extremely large files may cause processing and response times to increase. Also, there may be a problem with session timeout. Therefore, please limit the number of filings in one XML document to 100 filings. Remember a filing with three pages of collateral and 100 names will take as long to process as one hundred filings with minimal data.

File Name

There are no set criteria for the creation of file names, but there is a 250 character limit. It is recommended that the file be named so that you can easily track each file submitted. We suggest including the date and time in your file name.

Specifying the DTD in the XML Data File

Near the beginning of XML document there is a DOCTYPE section that specifies the location of the DTD that is used to validate the data in the XML document. Although the DTD itself can be included within the DOCTYPE section, it is usually maintained as a separate file. The DOCTYPE declaration specifies the name and/or location of the DTD file. The following is a sample DOCTYPE declaration, which must point to the New York DTD:

<!DOCTYPE Document SYSTEM "https://XXXXXXXX.dos.state.ny.us/ucc/bulkfilings/xml/DTD-File11152000.dtd">

The DOCTYPE declaration will be supplied upon successful completion of the prerequisites for using the NYS DOS Bulk XML Filing System,

Reserved Characters

There are five special characters that are reserved and cannot be used directly in XML element or attribute data, they must be replaced with what are called XML Entity References. These special characters act as flags to the parser; they delimit the document's actual content, and tell the parser to take specific actions. These special characters, therefore, must be represented as follows if they are included so that the parser does not misinterpret them:

Reserved Character	Entity Reference	Character Name
&	&	Ampersand
•	'	Apostrophe
и	"	Quote
<	&It	Less Than
>	>	Greater Than

For example, the debtor name of Crate & Barrel would be represented as: <OrganizationName>Crate & Barrel </OrganizationName>

NOTE: If your XML document includes any of these characters (&, ', ", <, >) between the begin and end tags, and they are not represented with the appropriate entity reference, the entire document will not be accepted and will not be processed.

Elements with No Data

If an element has no data value, it should be represented as an "empty" element, with a single element tag that includes the "slash" character after the element name. The following contains valid XML expressions for elements with no data:

<Mark/>

</Names>

County and Co-op Filings

The NYS DOS Bulk XML Filing System will not accept County and Co-op UCC filings for counties.

During processing, county filings are identified and rejected at no charge. This will be reflected in the acknowledgment file that you download from this office.

Contact Info(click on the link below)

NYS DOS UCC Customer Service

Fee for Electronic Filing

The filing fee, also referred to as a processing fee, is non-refundable and is paid to the Department of State at the time the document is presented to the Department of State for filing. This processing fee will be charged regardless of whether the document is accepted for filing or rejected. The following is a schedule of the NY DOS electronic filing fees:

Filing Type	Filing Fee
Manufactured Home Public Finance Transmitting Utility	\$20.00 \$20.00 \$20.00
All other Filing Types	\$20.00

UCC Financing Statement Form with XML Tags

See Valley of Ribellian See Se			
CC FINANCING STATEMENT < TransType	Co		
LLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME & PHONE OF CONTACT AT FILER [optional]	and the second s		
Filer.ContactName> <filer.contactphone><f< th=""><th>Filer.ContactEmail><piler.contac< th=""><th>tFax></th><th></th></piler.contac<></th></f<></filer.contactphone>	Filer.ContactEmail> <piler.contac< th=""><th>tFax></th><th></th></piler.contac<>	tFax>	
SEND ACKNOWLEDGMENT TO: (Name and Address)	250.24		
Filer ClientAccountNums			
The state of the s	1		
<filer organizationname=""></filer>			
<filer.mailaddress></filer.mailaddress>	U.S. 272 (92.66.7)		
<pre><filer.city><filer.state><filer.po< pre=""></filer.po<></filer.state></filer.city></pre>	stalCode>	«DebtorName, Pos	tal/Codes
	0.000	The same of the sa	
L		torName.State>	«DebtorName Suff
DESTABLE EVENT HILL LESS DATE	The second secon	SPACE IS FOR FILING OFFICE I	USE ONLY
DEBTOR'S EXACT FULL LEGAL NAME - insert only goe debtor in It a. ORGANIZATION'S NAME	ame (1a or 10) - do not abbreviate or combine names. < D	ebtorName>	
<debtorname.organizationname></debtorname.organizationname>			
TIS, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIR
<dobtorname.lastnames< td=""><td>eDebtorName FirstName's</td><td></td><td>7</td></dobtorname.lastnames<>	eDebtorName FirstName's		7
<pre>cuebtorname.Lastnames</pre>	cuentorname.Firstname>	Debt privage Middle	Marriera
MAILING ADDRESS	CITY CITY	STATE POSTAL CODE	COUNTRY
			COUNTRY
MAILING ADDRESS -DebtorName Mail Address SEE FESTIVETIONS ADDLINEORE 14 TYPE OF ORGANIZAT	CTY «DebtorName.City»		<pre>country <debtorname.count< pre=""></debtorname.count<></pre>
MAILING ADDRESS -DebtorName . MailAddress> SEE RETRECTORE ADDLINFORE IN TYPE OF CREANIZAT ORGANIZATION DEBTOR	OTY *DebtorName.City> HOUSE OF ORGANIZATION	Ig. ORGANIZATIONAL D.s. fe - DebtorName . Organ	<pre>country</pre>
MAILING ADDRESS -DebtorName . MailAddress> SEE ROTHLETONS ADDLINFORE In TYPE OF ORGANIZATION DEBTOR ADDITIONAL DESTOR'S EXACT FULL LEGAL NAME Insert or 72. ORGANIZATION'S NAME Insert or 73. ORGANIZATION'S NAME Insert or 74. ORGANIZATION'S NAME Insert or 75. ORGANIZATION'S NAME Insert or 76. ORGANIZATION'S NAME Insert or 77. ORGANIZATION'S NAME Insert or 78. ORGANIZATION'S NAME INSERT OR	OTY «DebtorName . City» H. JURISDICTION OF ORGANIZATION H. JURISDICTION OF ORGANIZATION Inly one debtor name (2s or 25) - so not abbreviate or combined.	STATE POSTAL CODE	<pre>country</pre>
MAILING ADDRESS -DebtorName .MailAddress> SEE ROTHLETONS ADDLINFORE In TYPE OF ORGANIZATION DEBTOR ADDLINFORE In TYPE OF ORGANIZATION DEBTOR SEARCT FULL LEGAL NAME Insert or	OTY *DebtorName.City> **Non H.JURISDICTION OF ORGANIZATION **Place debtor name (2s or 2b) - st not abbreviate or combinate. **Ype> **Organization**	STATE POSTAL CODE IG DECANZATIONAL DESIGNATION OF GARAGES THE HARMS THE HA	COUNTRY CDebtorName . Count Country Country Country None
MAILING ADDRESS -DebtorName . MailAddress> SEE ROTHLETONS ADDLINFORE In TYPE OF ORGANIZATION DEBTOR ADDITIONAL DESTOR'S EXACT FULL LEGAL NAME Insert or 72. ORGANIZATION'S NAME Insert or 73. ORGANIZATION'S NAME Insert or 74. ORGANIZATION'S NAME Insert or 75. ORGANIZATION'S NAME Insert or 76. ORGANIZATION'S NAME Insert or 77. ORGANIZATION'S NAME Insert or 78. ORGANIZATION'S NAME INSERT OR	OTY «DebtorName . City» H. JURISDICTION OF ORGANIZATION H. JURISDICTION OF ORGANIZATION Inly one debtor name (2s or 25) - so not abbreviate or combined.	STATE POSTAL CODE	<pre>country</pre>
MAILING ADDRESS *DebtorName . MailAddress> EME FESTRUCTIONE ADDLING RE In TYPE OF CRIANIZAT ebtorName . TaxID GREANIZATION DEBTOR DEBTOR ADDITIONAL DESTOR'S EXACT FULL LEGAL NAME INSERT OF CRIANIZATION NAME *ObstorName . Organizational T 25. INDIVIDUAL'S LAST NAME	OTY *DebtorName.City> NON M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION Myoce debtor name (2s or 25; - d) ros abbreviate or combination YPE> *DebtorName.Organization FRST NAME	STATE POSTAL CODE IG DREAMZATIONAL DE FIE OPEDIOYNAME. Organ THE TRANSPORTER OF THE TR	COUNTRY *DebtorName . Count *Exational ID- NOME SUFFIX
MAILING ADDRESS -DebtorName .MailAddress> SEE ROTHLETONS ADDLINFORE In TYPE OF ORGANIZATION DEBTOR ADDLINFORE In TYPE OF ORGANIZATION DEBTOR SEARCT FULL LEGAL NAME Insert or	OTY *DebtorName.City> **Non H.JURISDICTION OF ORGANIZATION **Place debtor name (2s or 2b) - st not abbreviate or combinate. **Ype> **Organization**	STATE POSTAL CODE IG DECANZATIONAL DESIGNATION OF GARAGES THE HARMS THE HA	COUNTRY CDebtorName . Count Country Country Country None
MALING ADDRESS *DebtorName . MailAddress> EME RESTRICTIONE ADDLINFO RE No. TYPE OF CRIANIZAT OR DEBTOR ADDLINFO RE No. TYPE OF CRIANIZAT OR DEBTOR ADDLINFO RE No. TYPE OF CRIANIZAT OR DEBTOR ADDLINFO RE No. TYPE OF CRIANIZATION RAME No. TYPE OF CRIANIZATION RAME ADDLINFO RAME Organizational T **DebtorName . Organizational T ADDLINFO RE Organizational T **SE INDIVIDUAL'S LAST NAME ADDLINFO RAME ORGANIZATION RAME ADDLINFO RAME ORGANIZATION RA	CTY *DebtorName.City> **MOON M.JURISDICTION OF ORGANIZATION **MOON OF ORGANIZATION **PROOF NAME **COTY** **COTY* **COTY	STATE POSTAL CODE IN ONCANIZATIONAL DIR FIN SDEDITONNAME. Organ IN ONCANIZATIONAL DIR FIN STATE POSTAL CODE STATE POSTAL CODE	COUNTRY *DebtorName.Count *IzationalID- NOME SUFFIX COUNTRY
MALING ADDRESS **DebtorName . MailAddress> ERE FistructionE ebtorName . TaxID ORGANIZATION ADDLINFO RE ORGANIZATION **DebtorName . OrganizationalT** 25. INDRVIOUAL'S LAST NAME MALING ADDRESS ADDLINFO RE 2a. TYPE OF ORGANIZATION ORGANIZATION	CTY *DebtorName.City> **MOON M.JURISDICTION OF ORGANIZATION **MOON OF ORGANIZATION **PROOF NAME **COTY** **COTY* **COTY	STATE POSTAL CODE IG DREAMZATIONAL DE FIE OPEDIOYNAME. Organ THE TRANSPORTER OF THE TR	COUNTRY *DebtoeName Count *EstionalID- NOME SUFFIX COUNTRY
MALING ADDRESS *DebtorName . MailAddress> ERE FRITALCTIONS ADDLINFO RE No. TYPE OF CRIANIZAT OR CHICAGO ORGANIZATION OR CHICAGO ORGANIZATION NAME ORGANIZATION ORGANIZATION DEBTOR 24 TYPE OF ORGANIZATION DEBTOR ORGANIZA	CITY *DebtorName.City> ION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION *DebtorName.Organization FRST NAME CITY ION 21.JURISDICTION OF ORGANIZATION	STATE POSTAL CODE IN ORGANIZATIONAL DIR FIN SENDING NAME OF GAR MIDDLE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DIR FIN	COUNTRY *DebtorName.Count *IzationalID- NOME SUFFIX COUNTRY
MAILING ADDRESS «DebtorName MailAddress» ERE FISTRUCTIONE ADDLINFO RE 1st TYPE OF ORGANIZAT ORGANIZATION DEBTOR ADDLINFO RE 1st TYPE OF ORGANIZAT ORGANIZATION'S NAME DEBTOR'S EXACT FULL LEGAL NAME Insert of Tal ORGANIZATION'S NAME DEBTORNAME ORGANIZATION MAILING ADDRESS SEE INSTRUCTIONS ADDLINFO RE 2st TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of AS	CITY *DebtorName.City> ION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION *DebtorName.Organization FRST NAME CITY ION 21.JURISDICTION OF ORGANIZATION	STATE POSTAL CODE IN ORGANIZATIONAL DIR FIN SENDING NAME OF GAR MIDDLE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DIR FIN	COUNTRY *DebtoeName Count *EstionalID- NOME SUFFIX COUNTRY
MALING ADDRESS **DebtorName . MailAddress> ERE FistructionE ebtorName . TaxID ORGANIZATION ADDLINFO RE ORGANIZATION **DebtorName . OrganizationalT** 25. INDRVIOUAL'S LAST NAME MALING ADDRESS ADDLINFO RE 2a. TYPE OF ORGANIZATION ORGANIZATION	CITY *DebtorName.City> ION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION *DebtorName.Organization FRST NAME CITY ION 21.JURISDICTION OF ORGANIZATION	STATE POSTAL CODE IN ORGANIZATIONAL DIR FIN SENDING NAME OF GAR MIDDLE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DIR FIN	COUNTRY COUNTRY COUNTRY SUPPL COUNTRY
MALING ADDRESS **DebtorName . MailAddress> BEE FESTRUCTIONE ADDL INFO RE No. TYPE OF CRIANIZAT OF COMMISSION ADDL INFO RE ADDL INFO	CITY *DebtorName.City> ION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION *DebtorName.Organization FRST NAME CITY ION 21.JURISDICTION OF ORGANIZATION	STATE POSTAL CODE IN ORGANIZATIONAL DIR FIN SENDING NAME OF GAR MIDDLE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DIR FIN	COUNTRY COUNTRY COUNTRY SUPPL COUNTRY
MALING ADDRESS **DebtorName . MailAddress> BEE FESTRUCTIONE ADDL INFO RE No. TYPE OF CRIANIZAT OF COMMISSION ADDL INFO RE ADDL INFO	OTY *DebtorName.City> **Non M.JURISDICTION OF ORGANIZATION **Marketing of the property of t	STATE POSTAL CODE IG DREAMZATIONAL DR. Fa CDEDCOYNAME. Organ MEDOLE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DR. Fa	COUNTRY *DebtorName Count *Izational ID- NOME SUFFIX COUNTRY NOME
MALING ADDRESS **DebtorName . MailAddress> BEE FESTRUCTIONE ADDL INFO RE No. TYPE OF CRITANIZAT OF COMMISSION OF CRITANIZAT OF CRITANIZAT OF CRITANIZATION SHAME OF CRITANIZATION	CITY *DebtorName.City> ION M.JURISDICTION OF ORGANIZATION M.JURISDICTION OF ORGANIZATION Mype> *DebtorName.Organization FRST NAME CITY ION 21 JURISDICTION OF ORGANIZATION SIGNOR S.P.) - Insert only gog secured party name (2a or 3) FRST NAME	STATE POSTAL CODE IN ORGANIZATIONAL DIR FIN INDOCE NAME STATE POSTAL CODE 29 ORGANIZATIONAL DIR FIN NIDDLE NAME MIDDLE NAME	COUNTRY *DebtorName Count *Izational ID- NOME SUFFIX COUNTRY NOME

5. ALTERNATIVE DESIGNATION (I applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BU	JYER AG. UEN NON-UCCFI
--	------------------------

Addendum Form with XML Tags

717	LOW INSTRUCTIONS (IN	R (18 or 16) ON RELATED FINANCE	O STATISHED			
	NW. CHICANGATIONS NAME	N 18 ON NEUKI EU FINANCE	NO STATEMENT			
33	24 0 10 00 00 00 00 00 00 00 00 00 00 00 0					
OR	99. EVDEVTOURS 'S LAST NAS	FIRST NAME	MODILE NAME SUFFIX			
	MSCELLANEOUS «NincInfo»					
17.	ADDITIONAL DEBTORS	EXACT FULL LEGAL NAME - Insent o	Toly one name (15a or 11b) - do not abbreviate or		IS FOR FILING OFFI	CE USE ONLY
	11a. ORGANIZATIONS MASS					
OR	THE NOMBURE LART NA	rk.	FIRST NAME	MIDDLE	NUME	surrix
116:	MAILING ACCRESS		ally	STATE	POSTAL CODE	COUNTR
114	10	EDT, INFO RE THE TYPE OF ORGANIZATION I	TION THE JURISDICTION OF ORGANIZATIO	54 H ₂ CR	SANIZATIONAL ID 8, FI	
12.	ADDITIONAL SECUP	ED PARTY'S a ASSIGNOR	S/PS NAME - meet proy gag harver; 12e or	1061		
1	12s ORGANIZATIONS NAME					
op.						
-	125. INDIVIDUAL'S LAST NA	6	FIRST NAME	MODEE	NAME	BLFFIX
	nacusaus com			1 2000000		1900000
-	MAILING ADDRESS		OTY	STATE	POSTAL CIDGE	COLATRI
_	olnRealEstate.De	AND DESCRIPTION OF THE PARTY OF			1	_
14.	catament, or is filed as a Description of real estate.		16. Additional college interription «College al. College	ņ.		
	Name and pathesa of a RECO IF Debtor does not have a neo	RD OWNER of above described real extension by the section of the s				

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT ADDENDUM/FORM UCC 14/0 (REV. 05/22/02)

Amendment Form with XML Tags

USS SWANSING STATEMENT AMENDM	ENT THE									
POLLOW PRISTRUCTIONS (from and been) CAPEFULLY	EMI <trams.ypex< th=""><th></th><th></th></trams.ypex<>									
A NAME & PHONE OF CONTACT AT FILER (optore) ContactName> <filer.contactphone><filer.contact< th=""><th>tBmailseFiler ContactPuss</th><th></th><th></th></filer.contact<></filer.contactphone>	tBmailseFiler ContactPuss									
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	- Control of the cont									
-Piler.ClientAccountNow-										
«Piler OganizationName»										
<pre><filer mailaddress=""> *Piler City**Piler State**Piler Posts</filer></pre>	1000es									
TVD02		PACE IS FOR FILING OFFICE US								
1s. INITIAL FINANCING STATEMENT FILE #	THE ABOVE S	Too This Charles was STATISMEN	T AND TOTAL DEPT.							
«FileNumber»		HEAL ESTATE RECORDS	×PilelmRealEst							
2. TERMINATION: (Mediumes of the Financing Statement serviced at		in Secured Party authorizing the 14/9/10	not poterient.							
 CONTINUATION: Efectiveness of the Financing Statement identifies condinued for the additional period provided by applicable law. 	distance with respect to security interesting of the Secu-	red Party authorizing this Continuation S	bitament in							
4. ASSIGNMENT out or partielt. Some name of assignment in time Taller To	and actives of assignee in item Tir, and also give name	of assignar in learn 9c	- 99							
5. AMENOMENT (PARTY INFORMATION): The Amendment official	Secured Party of record. Check only	one of these two boson. «Amondrees	ntActions							
Also check grig of the following three boxes and provide appropriate information	or in items 4 and/or 7									
OUNTIE varie and/or address. Qive current record name in them for 05, also give new OULTET name. Give record name ADD name. Compiled nam 76 or 70, and also are address of address changed in them 75. In the detailed in them for 0 to 00. 4. A property of CONSTRUCTION ADDRESS TO 15 and 15 a										
CURRENT RECORD INFORMATION - CURRENT NAME (84 ORDANIZATIONS NAME)										
«CurentName OrganizationName»										
OF SE INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	Curent Name .							
OrrentName LantName	«CurentNawe:PiratName»	-Curent Name . MiddleNa	Tel.							
7. CHANGED (NEW) OR ADDED INFORMATION. «Debtor Name»	or «Secured» or «Assignor»		- 1							
 Conducations when Congunizations are 										
C /GrganizationMane>	Inesthaue	Sabout www	TELEFOX							
a .LastNares	« PivntRame»	<middlename></middlename>	suffl:							
7c MAILING ADDRESS	atv	STATE POSTAL CODE	COUNTRY							
<mailaddress< td=""><td><ctby></ctby></td><td>PostalCo</td><td></td></mailaddress<>	<ctby></ctby>	PostalCo								
26 SEE HISTORIC TIDES ADDITIONS OF THE OF CHICAGOTTO	N. AURISONCHOR OF ORGANIZATION	re declarizational to a many chebt or Name . Organica	etionaliba							
-DebtorNave . TaxID - pagrok	1	The state of the s	NONE							
8 AMENDMENT (COLLATERA), CHANGE) stress only gos too.		The State of the S								
Describe collaboral Calebral or California, or give entire Cresolated or	planers description, or describe others. L. January	«AmendmentActio	n>							
«Collateral ColText»		.State>								
- DebtorName , Organica	rice of thems.									
eperconductive streaming	CHARLEYPE									
	DebtorName OrganizationalJuris	distinu								
- cAuthSecuredParty> or <authdebtor></authdebtor>										
	a same and		Day of Parkers and State							
	priced by a Debtor, streets from T and arran rather of C	EBTOR authorizing this Amendment.	of a paper who.							
 9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THE skip unlarest or adds the authorizing Debter, or if this is a Terrination suffi- 		7.11.1470-10.41111-10.511111								
 IN NAME OF SECURED PARTY OF RECORD AUTHORIZING THE sake cultured or adds the authorizing Dector, or if this is a Terrindon early plus ORGANIZATION'S NAME 										
akis calaberal or adio the authorizing Debtor, or if this is a Termination euthorize Congenit and Londianne a										
adds califormal or adds the subhorizing Debtor, or if this is a Terrimetron eath plus DRIENSZATION'S NAME	FREST MANN First Manner	WDOLE HAVE -MIGGLENANE >	Suffix>							

Amendment Addendum with XML Tags

2.	NAME OF PARTY AUTHORIZING	THIS AMENDMENT (Name as	ten I or Anestred form	
n	Us. INDIVIDUAC'S LAST HAME	FIRST NAME.	MEDIE NAME SUPPLY	

New York State Document Type Definition (DTD)

The Filing Document Type Definition (DTD) is a bi-directional transaction. The DTD allows for a filer to submit the UCC Financing Statement and the UCC Financing Statement Amendment to the Filing Office. The DTD also allows the Filing Office to return an acknowledgement to the filer indicating the filing was accepted or rejected

```
<?xml version="1.0" encoding="UTF-8"?>
<!DOCTYPE Document SYSTEM https://XXXXXXXX.dos.state.ny.us/ucc/bulkfilings/xml/DTD-</pre>
File11152000.dtd> (NOTE: XXXXXXXX will be supplied pending completion of prerequisites
for system usage)
<!-- DTD Version 1.0
<!-- Created 2000-11-15 -->
<!ELEMENT Acknowledgement (FileNumber, FileDate, FileTime, FeeAmount, FilingOffice,
FileStatus, Errors)>
<!ELEMENT ActionCode (#PCDATA)>
                                                                     Occurrence Index
<!ELEMENT AltFilingType (#PCDATA)>
<!ELEMENT AltNameDesignation (#PCDATA)>
                                                              * = Zero or more occurrence
<!ELEMENT AmendmentAction (#PCDATA)>
                                                              ? = zero or one occurrence
<!ELEMENT AmendmentType (#PCDATA)>
                                                              + = One or more occurrence
                                                              l = either/or
<!ELEMENT Assignor (Names+)>
                                                              No punctuation = exactly 1 occurrence
<!ELEMENT Attachment (Attachments+)>
<!ELEMENT Attachments ANY>
<!ELEMENT AuthDebtor (OrganizationName | IndividualName)>
<!ELEMENT AuthSecuredParty (OrganizationName | IndividualName)>
<!ELEMENT AuthorizingParty (AuthSecuredParty, AuthDebtor)>
<!ELEMENT City (#PCDATA)>
<!ELEMENT ClientAccountNum (#PCDATA)>
<!ELEMENT ColText (#PCDATA)>
<!ELEMENT Collateral (ColText, FSAProducts, Attachment)>
<!ELEMENT ContactEmail (#PCDATA)>
<!ELEMENT ContactFax (#PCDATA)>
<!ELEMENT ContactName (#PCDATA)>
<!ELEMENT ContactPhone (#PCDATA)>
<!ELEMENT Counties (County)>
<!ELEMENT Country (#PCDATA)>
<!ELEMENT County (#PCDATA)>
<!ELEMENT CurrentName (OrganizationName | IndividualName)>
<!ELEMENT DebtorAltCapacity (#PCDATA)>
<!ELEMENT DebtorName (Names, DebtorAltCapacity, Not-Indexed-Reason)>
<!ELEMENT Debtors (DebtorName+)>
<!ELEMENT Description (#PCDATA)>
<!ELEMENT Designation (#PCDATA)>
<!ELEMENT Document (Header, Record+, FileSignature?)>
<!ELEMENT ErrorText (#PCDATA)>
<!ELEMENT Errors (ErrorText+)>
<!ELEMENT FSAProducts (Name-Code)>
<!ELEMENT FeeAmount (#PCDATA)>
<!ELEMENT FileDate (#PCDATA)>
<!ELEMENT FileInRealEstate (Designation, RealEstateDescription, Names)>
<!ELEMENT FileNumber (#PCDATA)>
<!ELEMENT FileSignature (#PCDATA)>
<!ELEMENT FileStatus (#PCDATA)>
<!ELEMENT FileTime (#PCDATA)>
<!ELEMENT Filer (Names, ClientAccountNum, ContactName, ContactPhone, ContactEmail,
ContactFax)>
<!ELEMENT FilingOffice (#PCDATA)>
<!ELEMENT FirstName (#PCDATA)>
<!ELEMENT Header (Filer, PacketNum, Test)>
<!ELEMENT IndividualName (LastName, FirstName, MiddleName, Suffix)>
```

```
<!ELEMENT LastName (#PCDATA)>
<!ELEMENT Location (#PCDATA)>
<!ELEMENT MailAddress (#PCDATA)>
<!ELEMENT Mark (#PCDATA)>
<!ELEMENT MiddleName (#PCDATA)>
<!ELEMENT MiscInfo (#PCDATA)>
<!ELEMENT Name-Code (Years, Counties, Unit, Quantity, Location, Description)>
<!ELEMENT Names ((OrganizationName | IndividualName), MailAddress, City, State,
PostalCode, County, Country, TaxID, OrganizationalType, OrganizationalJuris,
OrganizationalID, Mark)>
<!ELEMENT Not-Indexed-Reason (#PCDATA)>
                                                                      Occurrence Index
<!ELEMENT OrganizationName (#PCDATA)>
<!ELEMENT OrganizationalID (#PCDATA)>
                                                                * = Zero or more occurrence
<!ELEMENT OrganizationalJuris (#PCDATA)>
                                                                ? = zero or one occurrence
<!ELEMENT OrganizationalType (#PCDATA)>
                                                                + = One or more occurrence
<!ELEMENT PacketNum (#PCDATA)>
                                                                I = either/or
                                                                No punctuation = exactly 1 occurrence
<!ELEMENT PostalCode (#PCDATA)>
<!ELEMENT Quantity (#PCDATA)>
<!ELEMENT RealEstateDescription (#PCDATA)>
<!ELEMENT Record (SeqNumber, TransType, AmendmentType, AmendmentAction, FileNumber,
FileDate, SubmitterRef, ActionCode, AltNameDesignation, AltFilingType, FileInRealEstate,
SearchToReflect, MiscInfo, CurrentName*, Debtors, Secured, Assignor*, Collateral,
AuthorizingParty+, Acknowledgement)>
<!ELEMENT SearchToReflect (#PCDATA)>
<!ELEMENT Secured (Names+)>
<!ELEMENT SeqNumber (#PCDATA)>
<!ELEMENT State (#PCDATA)>
<!ELEMENT SubmitterRef (#PCDATA)>
<!ELEMENT Suffix (#PCDATA)>
<!ELEMENT TaxID (#PCDATA)>
<!ELEMENT Test (#PCDATA)>
<!ELEMENT TransType (#PCDATA)>
<!ELEMENT Unit (#PCDATA)>
<!ELEMENT Year (#PCDATA)>
```

<!ELEMENT Years (Year+)>

XML Document Overview

Document

```
Header
        Filer> [Names((<OrganizationName> | IndividualName (<LastName>, <FirstName>, <MiddleName>, <Suffix>),
                 <MailAddress>, <City>, <State>, <PostalCode>, <County>, <Country>, <TaxID>, <OrganizationalType>,
                 <OrganizationalJuris>, <OrganizationalID>, <Mark>)), <ClientAccountNum>, <ContactName>,
                 <ContactPhone>, <ContactEmail>, <ContactFax>1
        <PacketNum>
        <Test>
Record +
        <SeqNumber>
                                                                                         Occurrence Index
        <TransType>
                                                                                * = Zero or more occurrence
        <AmendmentType>
                                                                                ? = zero or one occurrence
        <AmendmentAction>
                                                                                + = One or more occurrence
        <FileNumber>
                                                                                l = either/or
                                                                                No punctuation = exactly 1 occurrence
        <FileDate>
        <SubmitterRef>
        <ActionCode>
        <AltNameDesignation>
        <AltFilingType>
        FileInRealEstate [<Designation>, <RealEstateDescription>, <a href="Maintenance"><u>Names((</u><organizationName>)</a>
                                      IndividualName(<LastName>, <FirstName>, <MiddleName>, <Suffix>), <MailAddress>, <City>,
                                     <State>, <PostalCode>, <County>, <Country>, <TaxID>, <OrganizationalType>,
                                     <OrganizationalJuris>, <OrganizationalID>, Mark))]
        <SearchToReflect>
        <MiscInfo>
        <u>CurrentName*</u> [<OrganizationName> | <u>IndividualName</u>(<LastName>, <FirstName>, <MiddleName>, <Suffix>)]
        Debtors [DebtorName+(((Names((<OrganizationName> | IndividualName(<LastName>, <FirstName>, <MiddleName>,
                                     <Suffix>), <MailAddress>, <City>, <State>, <PostalCode>, <County>, <Country>, <TaxID>,
                                     <OrganizationalType>, <OrganizationalJuris>, <OrganizationalID>, <Mark>)),
                                     <DebtorAltCapacity>, <Not-Indexed-Reason>)))]
        Secured [Names+((<OrganizationName> | IndividualName(<LastName>, <FirstName>, <MiddleName>, <Suffix>),
                                     <MailAddress>, <City>, <State>, <PostalCode>, <County>, <Country>, <TaxID>,
                                     <OrganizationalType>, <OrganizationalJuris>, <OrganizationalID>, <Mark>))]
        Assignor* [Names+((<OrganizationName>, | IndividualName(<LastName>, <FirstName>, <MiddleName>, <Suffix>),
                                     <MailAddress>, <City>, <State>, <PostalCode>, <County>, <Country>, <TaxID>,
                                     <OrganizationalType>, <OrganizationalJuris>, <OrganizationalID>, <Mark>))]
        <u>Collateral</u> [<ColText>, (((FSAProducts((Name-Code(Years(<Year>+), Counties(<County>), <Unit>, <Quantity>,
                                      <Location>, <Description>)), Attachment(<Attachments>+) )))]
        <u>AuthorizingParty+</u> [AuthSecuredParty((<OrganizationName> | IndividualName(<LastName>, <FirstName>,
                                      < MiddleName>, < Suffix>)), AuthDebtor((< OrganizationName> | IndividualName(< LastName>,
                                     <FirstName>, <MiddleName>, <Suffix>))]
```

<FileSignature>?

NOTE: Bold text indicates Data Elements that are required for the XML file to be accepted by the Department of State.

Errors(<ErrorText>+)]

<u>Underlined text</u> indicates data elements that are made up of sub-elements and will not contain data.

Acknowledgment [<FileNumber>, <FileDate>, <FileTime>, <FeeAmount>, <FilingOffice>, <FileStatus>,

Assumptions about the Detailed XML Document Specifications

This document makes the following assumptions as it applies to XML and Revised Article 9.

- Payment information is not included in the XML filing.
- Correction statements are excluded from the XML filing.
- An electronic amendment cannot include multiple actions.
- An electronic amendment cannot change, delete, or add more than one party name
- The XML filing will not use collateral codes.
- All data transmitted in the filing must be returned to the filer.
- Sequence of filings is a filer issue not a filing office issue
- Attachments will not be allowed
- Search to reflect will not be allowed

Detailed XML Document Specifications

No punctuation = exactly 1 occurrence

= either/or

* = Zero or more occurrence

? = zero or one occurrence

+ = One or more occurrence

DOCUMENT

	<u> </u>	Г	<u> </u>	r	1	r	F	<u> </u>	<u> </u>	г	
Element	Eleme		Definiti	Max	Origi	Ame	Amen	Amend	Assignm	Continuat	Terminat
Location	nt		on	Leng	nal	nd	d	Collate	ent	ion	ion
				th		Debt	Secur	ral			
			Values in			or	ed				
			this column				Party				
			is an all-				1 al ty				
			inclusive list								
			of valid								
			values.								
			Examples								
			in this								
			column is a								
			list of								
			possible								
			values, but								
			is not an								
		0	all-								
		Occurre	inclusive								
		nce	list.								
Header					R	R	R	R	R	R	R
Record		+			R	R	R	R	R	R	R
FileSignat		?			0	О	0	O	О	О	О
ure										<u> </u>	

Bold text in the Element Location column or Element column indicates data elements which are made up of sub-elements, and will not contain data.

O = Optional

R = Required

-=N/A

FO = Optional, for Filing Office Use

FR = Required, for Filing Office Use RO = Required or optional, conditional

HEADER

	1		T	1				T .			
Elem ent Loca tion	Eleme nt	Occur	Values in this column is an all-inclusive list of valid values. Examples in this column is a list of possible values, but is not an all-inclusive	Max Len gth	Ori gina l	Am end De bto r	Am end Sec ure d Par ty	Ame nd Colla teral	Assign ment	Contin uation	Termi nation
		rence	list.								
Filer					R	R	R	R	R	R	R
	Names		Organizatio nName or Individual Name is required Note: If Organizatio nName is present, IndividualN ame must be blank, if IndividualN ame is present, Organizatio nName must be blank		R	R	R	R	R	R	R
	Organizatio nName	l	Designates an entity having a legal identity separate from its owner	200	O	0	O	O	0	0	0

Individual	I	If IndividualN		0	0	0	О	0	0	О
Name	F I i F N	ame is present, LastName s required, FirstName, MiddleNam e, and Suffix are optional								
LastName	r s a	Family name or surname for an	85	R	R	R	R	R	R	R
FirstName	r	First given name for an individual	60	0	0	0	0	0	0	O
MiddleNan e	a a s r a a i i e t r t t	All additional given names for an individual excluding the family name and the first given name	30	0	0	0	0	0	0	0
Suffix	1 a	A title of lineage for an andividual	9	O	0	O	0	0	0	0
MailAddres s	a t	Mailing address for the designated party	90	0	O	O	0	0	0	O
City	d	City for the designated party	30	O	O	O	0	О	0	О

State	2-character U.S. postal identificatio n code or 2-character Canadian province code Values: See Appendix A and Appendix B	2	0	0	0	O	0	O	O
PostalCode	The postal code for the party	10	О	О	О	0	0	0	0
County	County for the designated party	2	0	О	0	0	0	0	0
Country	3-character country code for the designated party Values: See Appendix C	3	0	0	0	0	O	0	O
TaxID	Taxpayer's identification number (social security number or employer identification number) NOTE: Not required in NYS	25	-	-	-	-	-	-	1

HEADER

Loca tion Values in this column is an all-inclusive list of valid values. Examples in this column is a list of possible values, but is not an all-inclusive list. Occur rence Filer Organization alType Organization debtor Examples: Corporation Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners Pipe Limited Liabilit y Compan y Limited Partners Pipe Limited Liabilit y Compan y Limited Partners	Elem	Eleme	-	Definiti	Max	Ori	Am	Am	Ame	Assign	Contin	Termi
Values in this column is an all-inclusive list of valid values.	ent	nt		on						ment	uation	nation
this column is an all-inclusive list of valid values. Companization af Type Corporation	Loca				gth	l	De	Sec	Colla			
column is an all-inclusive list of valid values. Examples in this column is a ilst of possible values, but is not an all-inclusive personnel list. Filer Organization alType Organization Fence Corporation Filer Organization Organization Organization Organization ASSOCia tion General Pattures Inip Limited Liabilit y Compan y Limited Patturess Inip Sole Propriet Organization alturis Organization organization	tion						bto	ure	teral			
Column is an ail-inclusive list of valid values. Examples in this column is a list of possible values. Occur rence list. Filer Organization aff ype Corporation Organization General Partners hip Limited Liabilit y Compan y Limited Partners hip hip Sole Propriet oralization of rothe organization of constances liabilit of compan y Limited Partners hip hip Sole Propriet oralization of rothe oralization of rothe oralization of organization of rothe oralization of organization of rothe oralization of organization of rothe oralization oralization of rothe oralization oralization of rothe oralization							r	d				
Filer Organization alluris Inclusive list of possible values, but is not an all-inclusive list. Type of possible values, but is not an all-inclusive list. Type of organizati on for the organizati on debtor Examples : Corporation General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet Organization alluris Organization alluris Jurisdicilo Organization alluris Organization alluris Jurisdicito Organization alluris Jurisdicito Organization alluris Jurisdicito Jurisdicito Organization alluris Jurisdicito Jurisdicito Jurisdicito Organization alluris Jurisdicito Jurisdicito Jurisdicito Jurisdicito Organization alluris Jurisdicito Jurisdic												
Bist of valid values. Examples in this column is a list of possible values, but is not an all-inclusive list. Type of organization alType 25 Corporation for the organization debtor Examples Corporation General Partners hip Limited Liabilit y Company y Limited Partners hip Limited Partners												
Filer Occur rence Filer Organization alType Type Organization for the organization on for the organization on debtor Examples: Corporation Foreign Association General Partners hip Limited Liability y Compan y Limited Partners hip Limited Partners hip Sole Propriet orship Organization alJuris Organization alJuris Organization alJuris Jurisdictio 40								ty				
Piler Organization artificial partners hip Limited Liabilit y y Limited Partners hip												
Filer Occur rence Type of organization alType Organization Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Sole Propriet orship Organization alluris Organization alluris Organization Organization alluris												
Column is a list of possible values, but is not an all-inclusive list. Filer Organization afType Organization afType Organization tion Foreign Associa tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y It limited Partners hip Sole Propriet orship Organization alluris Organization alluris Jurisdictio n for the debot that												
Filer Organization alType Organization alType Organization alType Organization alType Organization alType Organization alType Organization debtor Examples: Corporation General Partners hip Limited Liabilit J Partners hip Sole Propriet orship Organization alJuris Organization alJuris Organization alJuris Organization on for the organization of the document of the propriet orship Association on for the organization of the document of the document of the propriet or the propriet o												
Piler Organization alType Organization alType Organization alType Organization alType Organization alType Organization alType Organization alType Organization alType Organization alType Organization alVirisdictio alVirisdicti												
Piler Organization alType Organization alType Type of organization on debtor Examples: Corporation Association General Partners hip Limited Liability y Compan y Limited Partners hip Sole Propriet orship Organization alType Organization alType Unimited Description of the debtor that debtor												
Piler Organization alType Type of organization on debtor Examples: Corporation Foreign Association General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship												
Piler Occur rence Signification alType Organization alType Organization alType Type of organization on for the organizati on debtor Examples: Corporation Foreign Association General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris Organization alJuris A an limited a ball inclusive list.												
Filer Organization alType Corporation for the organizati on General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris Organization alJuris Organization on for the organizati on feet debtor that												
Filer Organization alType Organization alType Organization on for the organizati on debtor Examples : Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris Jurisdictio n for the debtor that			Occur	inclusive								
Organization alType organizati on for the organizati on debtor Examples : Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris Jurisdictio n for the debtor that			rence	1								
alType on for the organization debtor Examples: : Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alburis Jurisdictio n for the debtor that	Filer				25	-	-	-	-	-	-	-
organizati on debtor Examples :												
Examples : Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio o Goganization alJuris Jurisdictio o Goganization alJuris Jurisdictio o Granization alJuris Jurisdictio o Jurisdicio o Jurisdictio o Jurisdictio o Jurisdictio o Jurisdictio o		alType										
Examples : Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris 40												
Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio on for the alJuris Jurisdictio to the debtor that				on deptor								
Corpora tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio on for the alJuris debtor that												
tion Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio Organization alJuris tion Foreign Associa tion Foreign Fore												
Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Organization alJuris Foreign Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship												
Associa tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the debtor that												
tion General Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio Organization alJuris tion General Partners hip Limited Partners hip Sole Propriet orship												
Partners hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris A partners hip A partners				tion								
hip Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris hip Limited Partners hip Add												
Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris Limited Liabilit y Compan y Limited Partners hip Sole Propriet orship												
Liabilit y Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris debtor that												
Compan y Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris debtor that												
Compan y Limited Partners hip Sole Propriet orship Organization alJuris Automate A												
Jurisdictio n for the alJuris												
Limited Partners hip Sole Propriet orship Jurisdictio n for the alJuris debtor that				у								
hip Sole Propriet orship Jurisdictio 40				Limited								
Sole Propriet orship Jurisdictio n for the alJuris debtor that												
Propriet orship Jurisdictio 40												
Organization alJuris debtor that												
Organization alJuris debtor that												
Organization alJuris n for the debtor that												
alJuris debtor that					40	-	-	-	-	-	-	-
		alJuris										
organizati												
on organizati												

	Unique	15	-	-	-	-	-	-	-
Organization alID	identificati on number								
	for the								
	organizati								
	on debtor assigned								
	by the								
	agency								
	where the								
	charter document								
	was filed								
	for								
	organizati								
	on debtor								
	Values:								
	SSnnnn								
	nn where								
	SS is								
	the 2-								
	characte								
	r U.S.								
	Code								
	(see								
	Append ix A)								
	nnnnnn								
	is the								
	organizati								
	onal								
	identificati on								
	number								
	None If there								
	is no								
	organiza tional								
	tional								
	identific								
	ation								
	number								
Mark	Note:	-	-	-	-	-	-	-	-
	New York								
	will								
	ignore the Mark and								
	will not								
	image or								
	index it.								
ClientAccou	Unique	2	R	R	R	R	R	R	R
ntNum	NY DOS								
	number assigned								
	to the								
	Filer								

	ContactNam e	Contact person for	200	0	0	0	0	0	0	0
	G + PI	the Filer	20							
	ContactPhon e	Telephone number for the Filer's contact person	20	0	0	0	0	0	0	0
	ContactEmai 1	Email address for the Filer's contact person	200	R	R	R	R	R	R	R
	ContactFax	Facsimile number for the Filer's contact person	20	0	O	0	0	0	0	0
PacketN um	PacketNum	Unique identifyin g number for the file. Must be numeric.	25	R	R	R	R	R	R	R
		Note: Must be unique for each file submitted in a given day.								
Test	Test	Indicates the submissio n is for test purposes only	3	R	R	R	R	R	R	R
		Values: No Yes								

RECORD

Element Location	Element	Occu rrenc e	Values in this column is an all-inclusive list of valid values. Examples in this column is a list of possible values, but is not an all-inclusive list.	Ma x Len gth	Ori gin al	A me nd De bt or	Am end Sec ure d Par ty	Ame nd Coll ater al	Assig nmen t	Conti nuatio n	Termi natio n
SeqNumber	SeqNumber		Unique sequential number identifying the record Note: Must be unique for each filing in the document and increment by one for each filing	10	R	R	R	R	R	R	R
TransType	TransType		Indicates whether the filing is an initial financing statement or an amendment Values: Initial Amendment	9	R	R	R	R	R	R	R
Amendment Type	Amendment Type		Identifies the type of amendment: Values: AmendmentC ollateral AmendmentP arties Assignment Continuation TerminationD ebtor TerminationS ecuredParty Note: Only one AmendmentTyp e per record is allowed	24	-	R	R	R	R	R	R

Amendment	Amendment		19		R	R	R	0		
Action	Action	Indicates the type of change requested. Values:	19	-	K	K	К	U	-	-
		CollateralAdd CollateralCha nge CollateralDel								
		ete CollarteralRe state CollateralAss								
		ign DebtorAdd DebtorChang e								
		DebtorDelete SecuredParty Add SecuredParty								
		Change SecuredParty Delete								
		Note: Only one AmendmentAct ion per record is allowed								
FileNumber	FileNumber	If TranType = Initial, this field is blank	15	-	R	R	R	R	R	R
		If TranType = Amendment, this field contains the file number for the initial financing statement								
FileDate	FileDate	If TranType = Initial, this field is blank	8	-	0	0	0	0	0	0
		If TranType = Amendment, this field contains the file date for the initial financing statement								
		Note: For Pre- Revised Article 9 implementation only								
		Format: CCYYMMD D								

SubmitterR	SubmitterRe	Unique	100	О	О	О	О	О	0	0
ef	f	identifying								
		information for								
		the Filer								
ActionCode	ActionCode	2-digit New	2	О	О	О	0	О	О	О
		York County								
		Code								
		Should be 00								
		or not be								
		populated for								
		state filings.								
		D 1 1								
		Required for								
		county and co- op filings. A								
		value other than								
		00 in this data								
		element causes								
		the record to be								
		considered a								
		county or co-op								
		filing which								
		will be rejected.								
AltNameDe	AltNameDes	Alternate name	20	О	-	-	-	-	-	-
signation	ignation	designations for								
		Debtor/Secured								
		Party.								
		Values:								
		Lessee/Lessor								
		Consignee/Co								
		nsignor								
		Bailee/Bailor								
		Seller/Buyer								
AltFilingTy	AltFilingTyp	Alternate filing	19	О	-	-	-	-	-	-
pe	e	types								
		Values:								
		AgLien								
		FoodSecurity								
		Act Manufactured								
		Home								
		NonUCCFilin								
		g								
		PublicFinanc								
		e								
		Transmitting								
		Utility								
0	t						·	1	1	

FileInReal	Designation	Identifies the	21	О	О	_	0	О	0	0
Estate	Designation	type of real estate covered by the financing statement Values: AsExtractedC ollateral Fixture Timber	21	O		-	O	O	U	O
	RealEstateD escription	Description of the real estate indicated as timber, as- extracted collateral, or fixture	66 0	О	О	-	0	0	0	0
	Names	OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		0	0	-	-	-	-	-
	Organization Name	Designates an entity having a legal identity separate from its owner	200	0	0	-	-	-	-	-
	IndividualN ame	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		0	0	-	-	-	-	-
	LastName	Family name or surname for an individual	85	R	R	-	-	-	-	-
	FirstName	First given name for an individual	60	O	О	-	-	-	-	-

π							•		T	1
	MiddleName	All additional given names for an individual excluding the family name and the first given name	30	0	О	-	-	-	-	-
	Suffix	A title of lineage for an individual	9	0	0	-	-	-	-	-
	MailAddress	Mailing address for the designated party	90	0	0	-	-	-	-	-
	City	City for the designated party	30	0	0	-	-	-	-	-
	State	2-character U.S. postal identification code or 2- character Canadian province code Values: See Appendix A and Appendix B	2	0	0	-	-	-	-	-
	PostalCode	The postal code for the party	10	0	0	-	-	-	-	-
	County	County for the designated party	2	0	0	-	-	-	-	-
	Country	3-character country code for the designated party Values: See Appendix C	3	0	0	-	-	-	-	-
FileInReal Estate	TaxID	Taxpayer's identification number (social security number or employer identification number) NOTE: This element is not required in NYS	2 5	-	-	-	-	-	-	-

п		<u> </u>				1	ı	1	1	1
	Organization alType	Type of organization for the organization debtor	5	-	-	-	-	-	-	-
		Examples: Corporation Foreign Association General Partnership Limited Liability Company Limited Liability Partnership Limited Partnership Limited Partnership Foole Proprietorshi								
	Organizatito nalJuris	Jurisdiction for the debtor that is an organization	4 0	-	-	-	-	-	-	-
	Organization	Unique identification number for the organization debtor assigned by the agency where the charter document was filed for organization debtor Values: SSnnnnnn where SS is the 2-character U.S. Code (see Appendix A) nnnnnn is the organizational identification number None If there is no organizationa 1	1 5			-				
		identification number								

	Mand		Mada. N	1				ı		l	
	Mark		Note: New York will ignore the Mark and will not image or index it.	-	-	-	-	-	-	-	-
SearchToRe flect	SearchToRef lect		Not being implemented in NY	-	-	-	-	-	-	-	-
MiscInfo	MiscInfo		Identifies additional information not provided for on the UCC Financing Statement	4000	0	O	0	0	0	0	0
CurrentNa me		*	OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		-	O	0	-	-		-
CurrentNa me	Organization Name	ı	Designates an entity, having a legal identity separate from its owner, that is affected by the amendment	200	•	0	0	-	-	-	-
	IndividualN ame	ı	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		-	0	0	-	-	-	-
	LastName		Family name or surname for an individual, who is affected by the amendment	85	-	R	R	-	-	-	-

П			Ι	1	1		1	1	1	ı	
	FirstName		First given name for an individual who is affected by the amendment All additional	30	-	0	0	-	-	-	-
	MiddleName		given names for an individual who is affected by the amendment, excluding the family name and the first given name	30	-		0	-	-	-	-
	Suffix		A title of lineage for an individual who is affected by the amendment	9	-	0	0	-	-	-	-
Debtors					R	R	-	-	-	-	-
	DebtorNam e	+			R	R	-	-	-	-	-
	Names		OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		R	R	-	-	-	-	-
	Organization Name		Designates an entity having a legal identity separate from its owner Note: If the OrganizationNa me is present, OrganizationalT ype and OrganizationalJ uris are required	200	O	0	-	-	-	-	-

п	1							1		
	IndividualN ame	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		0	0	-	-	-	-	-
	LastName	Family name or surname for an individual	85	R	R	-	-	-	-	-
	FirstName	First given name for an individual	60	0	0	-	-	-	-	-
	MiddleName	All additional given names for an individual excluding the family name and the first given name	30	O	0	-	-	-	-	-
	Suffix	A title of lineage for an individual	9	0	0	-	-	-	-	-
	MailAddress	Mailing address for the designated party	90	R	R	-	-	-	-	-
Debtors	City	City for the designated party	30	R	R	-	-	-	-	-
	State	2-character U.S. postal identification code or 2- character Canadian province code Values: See Appendix A and Appendix B	2	RO	RO	-	-	-	-	-
	PostalCode	The postal code for the party	10	О	О	-	-	-	-	-
	County	County for the designated party	2	О	О	-	-	-	-	-

П	C	2 -1 4	2		0				I	
	Country	3-character country code for the designated party Values: See Appendix C	3	0	0	-	-	-	-	-
	TaxID	Taxpayer's identification number (social security number or employer identification number) Note: This element is not required in	25	0	0	-	-	-	-	-
		NYS			_					
	Organization alType	Type of organization for the organization debtor Note: If OrganizationNa me is present, OrganizationalT ype is required Examples: Corporation Foreign Association General Partnership Limited Liability Company Limited Partnership Sole Proprietorshi p	25	0	0				-	-
	Organization alJuris	Jurisdiction for the debtor that is an organization Note: If OrganizationNa me is present, OrganizationalJ uris is required	40	0	0	-	_	-	-	-

Doh4		TInion-	15							
Debtors		Unique	15	О	О	-	-	-	-	-
	Organization	identification								
	alID	number for the								
		organization								
		debtor assigned								
		by the agency								
		where the								
		charter								
		document was								
		filed for								
		organization								
		debtor								
		Note: If								
		OrganizationNa								
		me is present,								
		OrganizationalI								
		D is required								
		Values:								
		SSnnnnn								
		where SS is								
		the 2-								
		character U.S.								
		Character C.S.								
		Code (see								
		Appendix A)								
		nnnnn								
		is the								
		organizational								
		identification								
		number								
		None								
		If there is no								
		organizationa								
		1								
		identification								
		number								
	Mark	Note: New	-	-	-	-	-	-	-	-
	===	York will								
		ignore the Mark								
		and will not								
		image or index								
		it.								
	DebtorAltCa	Alternative	7	О	0	-	-	-	-	-
	pacity	capacity of the								
	•	debtor with								
		respect to								
		property								
		property								
		•, •								
		Values:								
		Estate								
		Trust								
		Trustee								
I	1	*****		1	1	1	I	I	I	I

П	NT /	D 4		I		1			1	1
	Not- Indexed- Reason	Reason the debtor was not indexed		-	-	-	-	-	-	-
		NOTE: New York will reject entire filing if any debtor is in error.								
Secured				R	-	R	-	R	_	-
Secured	Names	+ OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		R	-	R	-	R	-	-
	Organization Name	Designates an entity having a legal identity separate from its owner	200	0	-	0	-	0	-	-
	IndividualN ame	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		0	-	0	-	O	-	-
	LastName	Family name or surname for an individual	85	R	-	R	-	R	-	-
	FirstName	First given name for an individual	60	0	-	0	-	0	-	-
	MiddleName	All additional given names for an individual excluding the family name and the first given name	30	0	-	0	-	O	-	-

Т	Suffix	A title of	9	О		О	_	О	I	
	Suilix	lineage for an individual			-		-		-	-
	MailAddress	Mailing address for the designated party	90	R	-	R	-	R	-	-
Secured	City	City for the designated party	30	R	-	R	-	R	-	-
	State	2-character U.S. postal identification code or 2- character Canadian province code Values: See Appendix A and Appendix B	2	RO	-	RO	-	RO	-	-
	PostalCode	The postal code for the party	10	0	-	0	-	О	-	-
	County	County for the designated party	2	0	-	0	-	0	-	-
	Country	3-character country code for the designated party Values: See Appendix C	3	0	-	0	-	0	-	-
	TaxID	Taxpayer's identification number (social security number or employer identification number) NOTE: This element is not required in NYS	25	0	-	-	-	0	-	-

Org	ganization ype	Type of organization for the organization debtor Examples: Corporation Foreign Association General	25	-	-	-	-	-	-	-
		Partnership Limited Liability Company Limited Partnership Sole Proprietorshi p								
Org alJu	ganization	Jurisdiction for the debtor that is an organization	40	-	-	-	-	-	-	-
Org	ganization	Unique identification number for the organization debtor assigned by the agency where the charter document was filed for organization debtor	15	-	-	-	-	-	-	-
		Values: SSnnnnnn where SS is the 2- character U.S. Code (see Appendix A) nnnnnn is the								
		organizational identification number None If there is no organizationa 1 identification number								

Secured	Mark		Note: New	1	1			_	_		
Secured	Mark		York will ignore the Mark and will not image or index it.	-	-	-	-	-	-	-	-
Assignor		*			0	-	-	-	0	-	-
	Names	+	OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		R	-	-	v	0	-	-
	Organization Name	I	Designates an entity having a legal identity separate from its owner	200	0	-	-	-	O	-	-
	IndividualN ame	I	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		0	-	-	-	O	-	-
	LastName		Family name or surname for an individual	85	R	-	-	-	0	-	-
	FirstName		First given name for an individual	60	О	-	-	-	O	-	-
	MiddleName		All additional given names for an individual excluding the family name and the first given name	30	0	-	-	-	O	-	-
	Suffix		A title of lineage for an individual	9	О	-	-	-	0	-	-

П	T T	M '1' 11	00	D.	ı					
	MailAddress	Mailing address for the designated party	90	R	-	-	-	0	-	-
	City	City for the designated party	30	R	-	-	-	0	-	-
	State	2-character U.S. postal identification code or 2- character Canadian province code Values: See Appendix	2	RO	-	-	-	RO	-	-
		A and Appendix B								
	PostalCode	The postal code for the party	10	О	-	-	-	0	-	-
	County	County for the designated party	2	О	-	-	-	0	-	-
	Country	3-character country code for the designated party Values:	3	О	-	-	-	О	-	1
		See Appendix C								
	TaxID	Taxpayer's identification number (social security number or employer identification number)	25	-	-	-	-	-	-	-
		Note: This element is not required in NYS								

	Г	T	25	1	1	1	1		1	1
Assignor	Organization alType	Type of organization for the organization debtor	25	-	-	-	-	-	-	-
		Examples: Corporation Foreign Association								
		General Partnership Limited Liability Company								
		Limited Partnership Sole Proprietorshi p								
	Organization alJuris	Jurisdiction for the debtor that is an organization	40	-	-	-	-	-	-	-
	Organization alID	Unique identification number for the organization debtor assigned by the agency where the charter document was filed for organization debtor	15	-	-	-	-	-	-	-
		Values: SSnnnnn where SS is the 2- character U.S.								
		Code (see Appendix A) nnnnnn is the organizational identification								
		number None If there is no organizationa								
		identification number								

π				•		•				
	Mark	Note: New York will	-	-	-	-	-	-	-	-
		ignore the Mark								
		and will not								
		image or index								
		it.								
Collateral		New York will		R	-	-	R	-	-	-
		<u>not</u> index								
		collateral. It								
		will instead be								
		captured as a								
		part of the								
		image and will								
		also be reflected								
		in the XML acknowledgmen								
		t file.								
	ColText	Provide the	3276	О	_	_	О	_	_	_
	- 3.1.0	entire collateral	7							
		description for								
		all collateral								
		covered by the								
		Financing								
		Statement in								
		one ColText								
	FSAProduc	data element. FSAProducts					0			
		applies only to		О	-	-	О	-	-	-
	ts	county filings								
		county mings		О	_	-	О	-	-	-
	NameCode									
	Years			О	-	-	0	-	-	-
	Yea +	Year applies		О	-	-	О	-	-	-
	r	only to county								
		filings For Food								
		Security Act								
		products, the								
		year a crop is								
		grown, the year								
		an animal is								
		born or								
		acquired, or the								
		year poultry or								
		eggs will be								
		sold								
		Format:								
		YYYY								
				О	-	-	О	-	-	-
	Counties									
Collateral	Cou	County applies		О	-	-	О	-	-	-
	nty	only to county								
		filings								

I	Unit		Unit applies		О	-	-	0	-	_	_
	Cint		only to county			_	-		_		
			filings								
			Commonly used								
			identifier to								
			measure farm								
			products.								
			Examples:								
			Bushels								
			Head of								
			livestock								
	Quantity		Quantity		0	-	-	0	-	-	-
			applies only to								
			county filings								
			Quantity of the								
			farm product								
			listed								
			nsteu								
			Location		О	_	-	0	_	-	_
	Location		applies only to		O			O			
	Location		county filings								
			Location of the								
			Food Security								
			Act collateral								
			within the								
			county.								
			Description		О	-	-	О	-	-	-
	Description		applies only to								
			county filings								
			Textual								
			description of								
			the collateral								
			covered by the								
			Food Security								
			Act filing								
			Examples:								
			Bees/hives								
			Chickens								
			Tomatoes								
			Tomatoes								
	Attachment		Not being		-	-	-	-	-	-	-
			implemented in								
			NY								
		+	Not being	-	-	_	-	-	-	-	-
	Attachments	· ·	implemented in								
	- Attachments		NY								
Authorizi		+	- 1 -		-	О	О	О	0	0	О
	l	<u> </u>									J

ngParty	AuthSecure	OrganizationNa		_	_	О	0	0	0	0
	dParty	me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank								
	Organization Name	Name of the Secured Party authorizing the amendment	200	-	-	0	0	0	0	0
	IndividualN ame	If IndividualName is present, LastName is required, FirstName, MiddleName, and Suffix are optional		-	-	0	0	0	0	0
	LastName	Family name or surname for an individual	85	-	-	R	R	R	R	R
	FirstName	First given name for an individual	60	-	-	0	0	0	0	0
	MiddleName	All additional given names for an individual excluding the family name and the first given name	30	-	-	0	0	0	0	0
Authorizin gParty	Suffix	A title of lineage for an individual	9	-	-	O	0	0	О	0

	AuthDebtor	OrganizationNa me or Individual Name is required Note: If OrganizationNa me is present, IndividualName must be blank, if IndividualName is present, OrganizationNa me must be blank		-	0	-	0	-	-	0
	Organization Name	Name of the Debtor authorizing the amendment	200	-	0	-	0	-	-	0
	IndividualN ame	If IndividualName is present, LastName is required FirstName, MiddleName, and Suffix are optional		-	0	-	0	-	-	0
	LastName	Family name or surname for an individual	85	-	R	-	R	-	-	0
	FirstName	First given name for an individual	60	-	0	-	О	-	-	0
	MiddleName	All additional given names for an individual excluding the family name and the first given name	30	-	0	-	0	-	-	0
	Suffix	A title of lineage for an individual	9	-	0	-	О	-	-	0
Acknowled				FR						
gment	FileNumber	Unique identifying number assigned by the Filing Office to an accepted UCC document		FR						

| | FileDate | File date the initial financing statement or amendment is accepted by the Filing Office Format: CCYYMMD D | FR |
|-----------------|--------------|---|----|----|----|----|----|----|----|
| | FileTime | File time the document is accepted by the Filing Office Format: HHMM | FR |
| | FeeAmount | Fee for filing a UCC Financing Statement or UCC Financing Statement Amendment; or processing a Search Request Format: NNNNNNN N.NN (8.2) | FR |
| | FilingOffice | Filing office in which the document was filed Value: New York State | FR |
| Acknowled gment | FileStatus | Indicates whether the document was accepted or rejected. Values: Accepted Accepted with Errors Rejected | FR |
| | Errors | | FO |

ErrorText	+	Indicates the	FO						
		reason(s) the							
		document was							
		not accepted by							
		the Filing							
		Office							
		Values:							
		See Appendix							
		D							

XML Sample – Initial Filing

```
<?xml version="1.0" encoding="UTF-8"?>
<!DOCTYPE Document SYSTEM "https://XXXXXXXX.dos.state.ny.us/ucc/bulkfilings/xml/DTD-</pre>
File11152000.dtd">
<Document>
      <Header>
            <Filer>
                  <Names>
                        <OrganizationName>Lexis Document Services/OrganizationName>
                        <MailAddress>801 Adlai Stevenson Drive</mailAddress>
                        <City>Springfield</City>
                        <State>IL</State>
                        <PostalCode>62703</PostalCode>
                        <County/>
                        <Country>USA</Country>
                        <TaxID>1234567</TaxID>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
                  <ClientAccountNum>03</ClientAccountNum>
                  <ContactName>Tommy Filer</ContactName>
                  <ContactPhone>(217)444-1234</ContactPhone>
                  <ContactEmail>tfiler@yahoo.com</ContactEmail>
                  <ContactFax>(217)123-5678</ContactFax>
            <PacketNum>001</PacketNum>
            <Test>No</Test>
      </Header>
      <Record>
            <SeqNumber>00000001
            <TransType>Initial</TransType>
            <AmendmentType/>
            <AmendmentAction/>
            <FileNumber/>
            <FileDate/>
            <SubmitterRef>123456-098/SubmitterRef>
            <ActionCode/>
            <AltNameDesignation/>
            <AltFilingType/>
            <FileInRealEstate>
                  <Designation/>
                  <RealEstateDescription/>
                  <Names>
                        <OrganizationName/>
                        <MailAddress/>
                        <Citv/>
                        <State/>
                        <PostalCode/>
                        <County/>
                        <Country/>
                        <TaxID/>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
            </FileInRealEstate>
            <SearchToReflect/>
```

```
<MiscInfo/>
            <CurrentName>
                  <OrganizationName/>
            </CurrentName>
            <Debtors>
                  <DebtorName>
                        <Names>
                              <OrganizationName>Dizzy Izzys NY Bagels
Inc</OrganizationName>
                              <MailAddress>408 West 14th Street</MailAddress>
                              <City>New York</City>
                              <State>NY</State>
                              <PostalCode>10014</PostalCode>
                              <County/>
                              <Country>USA</Country>
                              <TaxID/>
                        <OrganizationalType>Corporation</OrganizationalType>
                              <OrganizationalJuris>New York
                              <OrganizationalID>None</OrganizationalID>
                              <Mark/>
                        </Names>
                        <DebtorAltCapacity/>
                        <Not-Indexed-Reason/>
                  </DebtorName>
            </Debtors>
            <Secured>
                        <OrganizationName>Key Bank</OrganizationName>
                        <MailAddress>445 Broadhollow Road</MailAddress>
                        <City>Melville</City>
                        <State>NY</State>
                        <PostalCode>11747</PostalCode>
                        <County/>
                        <Country>USA</Country>
                        <TaxID/>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
            </Secured>
            <Assignor>
                  <Names>
                        <OrganizationName/>
                        <MailAddress/>
                        <City/>
                        <State/>
                        <PostalCode/>
                        <County/>
                        <Country/>
                        <TaxID/>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
            </Assignor>
            <Collateral>
                  <ColText>Two dozen bagels and a pint of peanut butter schmear</ColText>
                  <FSAProducts>
                        <Name-Code>
```

```
<Years>
                                    <Year/>
                              </Years>
                              <Counties>
                                    <County/>
                              </Counties>
                              <Unit/>
                              <Quantity/>
                              <Location/>
                              <Description/>
                        </Name-Code>
                  </FSAProducts>
                  <Attachment>
                        <Attachments/>
                  </Attachment>
            </Collateral>
            <AuthorizingParty>
                  <AuthSecuredParty>
                        <OrganizationName/>
                  </AuthSecuredParty>
                  <AuthDebtor>
                        <OrganizationName/>
                  </AuthDebtor>
            </AuthorizingParty>
            <Acknowledgement>
                  <FileNumber/>
                  <FileDate/>
                  <FileTime/>
                  <FeeAmount/>
                  <FilingOffice/>
                  <FileStatus/>
                  <Errors>
                        <ErrorText/>
                  </Errors>
            </Acknowledgement>
      </Record>
      <FileSignature/>
</Document>
```

XML Sample – Amendment Filing

```
<?xml version="1.0" encoding="UTF-8"?>
<!DOCTYPE Document SYSTEM "https://XXXXXXXX.dos.state.ny.us/ucc/bulkfilings/xml/DTD-</pre>
File11152000.dtd">
<Document>
      <Header>
            <Filer>
                  <Names>
                        <OrganizationName>Lexis Document Services/OrganizationName>
                        <MailAddress>801 Adlai Stevenson Drive</mailAddress>
                        <City>Springfield</City>
                        <State>IL</State>
                        <PostalCode>62703</PostalCode>
                        <County/>
                        <Country>USA</Country>
                        <TaxID>1234567</TaxID>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
                  <ClientAccountNum>02</ClientAccountNum>
                  <ContactName>Tommy Filer</ContactName>
                  <ContactPhone>(217)444-1234</ContactPhone>
                  <ContactEmail>tfiler@yahoo.com</ContactEmail>
                  <ContactFax>(217)123-5678</ContactFax>
            <PacketNum>2</PacketNum>
            <Test>Yes</Test>
      </Header>
      <Record>
            <SeqNumber>1</SeqNumber>
            <TransType>Amendment
            <AmendmentType>AmendmentParties
            <AmendmentAction>SecuredPartyChange</AmendmentAction>
            <FileNumber>1</FileNumber>
            <FileDate>20010522</FileDate>
            <SubmitterRef>123456-098/SubmitterRef>
            <ActionCode/>
            <AltNameDesignation/>
            <AltFilingType/>
            <FileInRealEstate>
                  <Designation/>
                  <RealEstateDescription/>
                  <Names>
                        <OrganizationName/>
                        <MailAddress/>
                        <Citv/>
                        <State/>
                        <PostalCode/>
                        <County/>
                        <Country/>
                        <TaxID/>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
                        <Mark/>
                  </Names>
            </FileInRealEstate>
            <SearchToReflect/>
```

```
<MiscInfo/>
<CurrentName>
      <OrganizationName>Key Bank
</CurrentName>
<Debtors>
      <DebtorName>
            <Names>
                 <OrganizationName/>
                 <MailAddress/>
                 <City/>
                 <State/>
                  <PostalCode/>
                  <County/>
                 <Country/>
                  <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
            <OrganizationalID/>
                  <Mark/>
            </Names>
            <DebtorAltCapacity/>
            <Not-Indexed-Reason/>
      </DebtorName>
</Debtors>
<Secured>
      <Names>
            <OrganizationName>Key3 Bank
            <MailAddress>445 Broadhollow Road</MailAddress>
            <City>Melville</City>
            <State>NY</State>
            <PostalCode>11747</PostalCode>
            <County/>
            <Country>USA</Country>
            <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
            <OrganizationalID/>
            <Mark/>
      </Names>
</Secured>
<Assignor>
      <Names>
            <OrganizationName/>
            <MailAddress/>
            <Citv/>
            <State/>
            <PostalCode/>
            <County/>
            <Country/>
            <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
            <OrganizationalID/>
            <Mark/>
      </Names>
</Assignor>
<Collateral>
      <ColText/>
      <FSAProducts>
           <Name-Code>
                  <Years>
```

```
<Year/>
                              </Years>
                              <Counties>
                                    <County/>
                              </Counties>
                              <Unit/>
                              <Quantity/>
                              <Location/>
                              <Description/>
                        </Name-Code>
                  </FSAProducts>
                  <Attachment>
                        <Attachments/>
                  </Attachment>
            </Collateral>
            <AuthorizingParty>
                  <AuthSecuredParty>
                        <OrganizationName>Key3 Bank
                  </AuthSecuredParty>
                  <AuthDebtor>
                        <OrganizationName/>
                  </AuthDebtor>
            </AuthorizingParty>
            <Acknowledgement>
                  <FileNumber/>
                  <FileDate/>
                  <FileTime/>
                 <FeeAmount/>
                 <FilingOffice/>
                 <FileStatus/>
                  <Errors>
                        <ErrorText/>
                  </Errors>
           </Acknowledgement>
     </Record>
<Record>
            <SeqNumber>2</SeqNumber>
           <TransType>Amendment</TransType>
           <AmendmentType>TerminationDebtor</AmendmentType>
           <AmendmentAction/>
           <FileNumber>2</FileNumber>
           <FileDate>20010522</FileDate>
           <SubmitterRef>123456-098</SubmitterRef>
           <ActionCode/>
           <AltNameDesignation/>
           <AltFilingType/>
           <FileInRealEstate>
                  <Designation/>
                  <RealEstateDescription/>
                  <Names>
                        <OrganizationName/>
                        <MailAddress/>
                        <City/>
                        <State/>
                        <PostalCode/>
                        <County/>
                        <Country/>
                        <TaxID/>
                        <OrganizationalType/>
                        <OrganizationalJuris/>
                        <OrganizationalID/>
```

```
<Mark/>
      </Names>
</FileInRealEstate>
<SearchToReflect/>
<MiscInfo/>
<CurrentName>
      <IndividualName>
            <LastName>Rogers
            <FirstName>Norville</FirstName>
            <MiddleName/>
            <Suffix/>
      </IndividualName>
</CurrentName>
<Debtors>
      <DebtorName>
            <Names>
                  <OrganizationName/>
<MailAddress/>
<City/>
                  <State/>
                  <PostalCode/>
                  <County/>
                  <Country/>
                  <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
                  <OrganizationalID/>
                  <Mark/>
            </Names>
            <DebtorAltCapacity/>
            <Not-Indexed-Reason/>
      </DebtorName>
</Debtors>
<Secured>
      <Names>
            <OrganizationName/>
            <MailAddress/>
            <City/>
            <State/>
            <PostalCode/>
            <County/>
            <Country/>
            <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
            <OrganizationalID/>
            <Mark/>
      </Names>
</Secured>
<Assignor>
      <Names>
            <OrganizationName/>
            <MailAddress/>
            <City/>
            <State/>
            <PostalCode/>
            <County/>
            <Country/>
            <TaxID/>
            <OrganizationalType/>
            <OrganizationalJuris/>
```

```
<OrganizationalID/>
                        <Mark/>
                  </Names>
            </Assignor>
            <Collateral>
                 <ColText/>
                 <FSAProducts>
                       <Name-Code>
                             <Years>
                                   <Year/>
                              </Years>
                              <Counties>
                                    <County/>
                              </Counties>
                              <Unit/>
                              <Quantity/>
                              <Location/>
                             <Description/>
                       </Name-Code>
                  </FSAProducts>
                 <Attachment>
                        <Attachments/>
                  </Attachment>
            </Collateral>
            <AuthorizingParty>
                  <AuthSecuredParty>
                        <OrganizationName>Key Bank
                 </AuthSecuredParty>
                  <AuthDebtor>
                        <OrganizationName/>
                 </AuthDebtor>
            </AuthorizingParty>
            <Acknowledgement>
                 <FileNumber/>
                 <FileDate/>
                 <FileTime/>
                 <FeeAmount/>
                 <FilingOffice/>
                 <FileStatus/>
                  <Errors>
                        <ErrorText/>
                  </Errors>
            </Acknowledgement>
      </Record>
     <FileSignature/>
</Document>
```

APPENDIX A

US State Codes

(See Country Code Table -Appendix C - for Extra Territorial Jurisdictions)

State Name	Code
Alaska	AK
Alabama	AL
Arkansas	
Arizona	AZ
California	
Colorado	
Connecticut	
District of Columbia	DC
Delaware	DE
Florida	FL
Georgia	GA
Hawaii	
Iowa	IA
Idaho	
Illinois	IL
Indiana	
Kansas	KS
Kentucky	KY
Louisiana	
Massachusetts	MA
Maryland	MD
Maine	ME
Michigan	MI
Minnesota	
Missouri	
Mississippi	
Montana	
Nebraska	NE
North Carolina	NC
North Dakota	ND
New Hampshire	NH
New Jersey	
New Mexico	NM
Nevada	NV
New York	NY
Ohio	ОН
Oklahoma	OK
Oregon	OR
Pennsylvania	
Rhode Island	
South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	
Virginia	VA
Vermont	
Washington	WA
Wisconsin	
West Virginia	WV
Waranina	33737

APPENDIX B

Canadian Provinces

Alberta	ode
British Columbia	
Manitoba	AB
	BC
New Brunswick	ME
	NB
Newfoundland	NF
Northwest Territories	NT
Nova Scotia	
Nunavut	NU
Ontario	
Prince Edward Island	PE
Quebec	
Saskatchewan	
Yukon Territory	

Additional Codes

<u>Name</u>	Code
Armed Services	AE

APPENDIX C

Country Codes from ISO 3166

Uŗ	dated	by t	he RIP	'E Network	: Coordinati	ion Centre.
----	-------	------	--------	------------	--------------	-------------

Source: ISO 3166 Maintenance Agency
Latest change: Thu Aug 7 17:59:51 MET DST 1997

Country	<u>A3</u>
AFGHANISTAN	
ALBANIA	
ALGERIA	
AMERICAN SAMOA	
ANDORRA	
ANGOLA	AGO
ANGUILLA	AIA
ANTARCTICA	ATA
ANTIGUA AND BARBUDA	
ARGENTINA	ARG
ARMENIA	ARM
ARUBA	ABW
AUSTRALIA	AUS
AUSTRIA	AUT
AZERBAIJAN	AZE
BAHAMAS	BHS
BAHRAIN	BHR
BANGLADESH	BGD
BARBADOS	BRB
BELARUS	BLR
BELGIUM	BEL
BELIZE	BLZ
BENIN	
BERMUDA	BMU
BHUTAN	
BOLIVIA	
BOSNIA AND HERZEGOWINA	
BOTSWANA	
BOUVET ISLAND	
BRAZIL	
BRITISH INDIAN OCEAN TERRITORY	
BRUNEI DARUSSALAM	
BULGARIA	
BURKINA FASO	
BURUNDI	
CAMBODIA	
CAMEROON	
CANADA	
CAPE VERDE	
CAYMAN ISLANDS	
CENTRAL AFRICAN REPUBLIC	
CHAD	
CHILE	

CHINA	CHN
CHRISTMAS ISLAND	CXR

Country A3

COCOS (KEELING) ISLANDS	
COLOMBIA	
COMOROS	
CONGO	
CONGO, THE DEMOCRATIC REPUBLIC OF THE	
COOK ISLANDS	
COSTA RICA	
COTE D'IVOIRE	
CROATIA (local name: Hrvatska)	
CUBA	
CYPRUS	
CZECH REPUBLIC	
DENMARK	
DJIBOUTI	
DOMINICA	
DOMINICAN REPUBLIC	
EAST TIMOR	
ECUADOR	
EGYPT	
EL SALVADOR	
EQUATORIAL GUINEA	
ERITREA	
ESTONIA	
ETHIOPIA	
FALKLAND ISLANDS (MALVINAS	
FAROE ISLANDS	FRO
FUI	FJI
FINLAND	FIN
FRANCE	FRA
FRANCE, METROPOLITAN	FXX
FRENCH GUIANA	
FRENCH POLYNESIA	
FRENCH SOUTHERN TERRITORIES	ATF
GABON	
GAMBIA	GMB
GEORGIA	GEO
GERMANY	
GHANA	
GIBRALTAR	
GREECE	GRC
GREENLAND	
GRENADA	
GUADELOUPE	
GUAM	
GUATEMALA	
GUINEA	
GUINEA-BISSAU	
GUYANA	
HAITI	
HEARD AND MC DONALD ISLANDS	
HOLY SEE (VATICAN CITY STATE	
HONDURAS	ממח

Country	13
---------	----

HONG KONG	шис
HONG KONG	
HUNGARY	
ICELAND	
INDIA	
INDONESIA	
IRAN (ISLAMIC REPUBLIC OF	
IRAQ	
IRELAND	
ISRAEL	
ITALY	
JAMAICA	
JAPAN	
JORDAN	
KAZAKHSTAN	
KENYA	KEN
KIRIBATI	KIR
KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF	PRK
KOREA, REPUBLIC OF	
KUWAIT	KWT
KYRGYZSTAN	KGZ
LAO PEOPLE'S DEMOCRATIC REPUBLIC	LAO
LATVIA	LVA
LEBANON	LBN
LESOTHO	LSO
LIBERIA	
LIBYAN ARAB JAMAHIRIYA	
LIECHTENSTEIN	
LITHUANIA	
LUXEMBOURG	
MACAU	
MACEDONIA, THE FORMER YUGOSLAV REPUBLIC OF	
MADAGASCAR	
MALAWI	
MALAYSIA	
MALDIVES	
MALI	
MALTA	
MARSHALL ISLANDS	
MARTINIQUE	
MAURITANIA	_
MAURITIUS	
MAYOTTE	
MEXICO	
MICRONESIA, FEDERATED STATES OF	
MOLDOVA, REPUBLIC OF	
MONACO	
MONGOLIA	
MONTSERRAT	
MOROCCO	
MOZAMBIQUE	
MYANMAR	MMR

Country A3

NAMIBIA	
NAURU	
NEPALNETHERLANDS	
NETHERLANDS ANTILLES	
NEW CALEDONIA	
NEW ZEALAND	
NICARAGUA	
NIGER	
NIGERIA	
NIUE	
NORFOLK ISLAND	NFK
NORTHERN MARIANA ISLANDS	
NORWAY	
OMAN	
PAKISTAN	
PALAU	
PANAMA	
PAPUA NEW GUINEA	
PARAGUAY	
PERU	
PHILIPPINES	
PITCAIRN	
POLAND	
PORTUGAL	
PUERTO RICO	
QATAR	
REUNION	
ROMANIA	
RUSSIAN FEDERATION	
RWANDA	
SAINT KITTS AND NEVIS	
SAINT LUCIA	
SAINT VINCENT AND THE GRENADINES	
SAMOA	WSM
SAN MARINO	
SAO TOME AND PRINCIPE	STP
SAUDI ARABIA	SAU
SENEGAL	SEN
SEYCHELLES	SYC
SIERRA LEONE	SLE
SINGAPORE	SGP
SLOVAKIA (Slovak Republic)	SVK
SLOVENIA	SVN
SOLOMON ISLANDS	
SOMALIA	
SOUTH AFRICA	
SOUTH GEORGIA AND THE SOUTH SANDWICH ISLANDS	
SPAIN	
SRI LANKA	
ST. HELENA	
ST. PIERRE AND MIQUELON	

Country	A3
---------	----

SUDAN	SDN
SURINAME	
SVALBARD AND JAN MAYEN ISLANDS	
SWAZILAND	
SWEDEN	SWE
SWITZERLAND	
SYRIAN ARAB REPUBLIC	SYR
TAIWAN, PROVINCE OF CHINA	TWN
TAJIKISTAN	TJK
TANZANIA, UNITED REPUBLIC OF	TZA
THAILAND	THA
TOGO	TGO
TOKELAU	TKL
TONGA	TON
TRINIDAD AND TOBAGO	TTO
TUNISIA	TUN
TURKEY	TUR
TURKMENISTAN	TKM
TURKS AND CAICOS ISLANDS	TCA
TUVALU	TUV
UGANDA	UGA
UKRAINE	
UNITED ARAB EMIRATES	ARE
UNITED KINGDOM	GBR
UNITED STATES	
UNITED STATES MINOR OUTLYING ISLANDS	
URUGUAY	
UZBEKISTAN	
VANUATU	
VENEZUELA	VEN
VIET NAM	
VIRGIN ISLANDS (BRITISH)	VGB
VIRGIN ISLANDS (U.S)	
WALLIS AND FUTUNA ISLANDS	
WESTERN SAHARA	
YEMEN	
YUGOSLAVIA	
ZAMBIA	ZMB
7IMR A RWF	7W F

APPENDIX D

Error or Rejection Codes

Code	Text
GF01	The record has not been communicated by a method or medium
	authorized by this filing office.
GF02	Failure to provide sufficient filing fees.
GF03	Failure to provide name of Debtor.
GF04	Failure to indicate whether the Debtor is an individual or an organization.
GF05	Failure to provide last name of Debtor, if identified as in individual.
GF06	Failure to provide organizational information for Debtor, if identified
GI 00	as an organization.
	 A type of organization for the Debtor,
	 A jurisdiction of organization for the Debtor, or
	 Organization identification number for the Debtor or an
	indication that the Debtor has none.
GF07	Failure to provide a mailing address for the Debtor.
GF08	Failure to provide a name for the Secured Party.
GF09	Failure to provide a mailing address for the Secured Party.
GA01	Failure to identify a file number of an initial financing statement to which it relates.
GA02	Failure to provide an active file number to which it relates.
AC01	Failure to file within the prior to lapse six-month window.
AA01	Failure to provide a name for the Assignee.
AA02	Failure to provide a mailing address for the Assignee.
GF10 ¹	Other
	AMENDMENT INFORMATION WAS RECEIVED WITH AN
	INITIAL FINANCING STATEMENT
	FAILURE TO PROVIDE VALID ALTERNATE FILING TYPE.
	FAILURE TO PROVIDE VALID ALTERNATE NAME
	DESIGNATION FOR DEBTOR/SECURED PARTY.
	FAILURE TO PROVIDE A VALID ALTERNATIVE DEBTOR
	CAPACITY.
	FAILURE TO PROVIDE A VALID TYPE OF REAL ESTATE
	COVERED BY THE FINANCING STATEMENT.
	MULTIPLE AUTHORIZING PARTIES WERE RECEIVED
	WITH FILING.

	DEBTOR INFORMATION WAS RECEIVED WITH AN
	AMENDMENT (COLLATERAL).
	SECURED PARTY INFORMATION WAS RECEIVED WITH
	AN AMENDMENT (COLLATERAL).
	DEBTOR INFORMATION WAS RECEIVED WITH AN
	AMENDMENT (CONTINUATION).
	FAILURE TO PROVIDE A VALID AMENDMENT ACTION.
Code	Text
GF10 ¹	FAILURE TO PROVIDE A VALID AMENDMENT TYPE.
GITO	SECURED PARTY INFORMATION WAS RECEIVED WITH
	AN AMENDMENT (CONTINUATION).
	FAILURE TO PROVIDE CURRENT NAME FOR
	AMENDMENT (DEBTOR CHANGE OR DELETE).
	CURRENT NAME INFORMATION WAS RECEIVED WITH
	AN AMENDMENT (DEBTOR ADD).
	MULTIPLE CURRENT NAMES WERE RECEIVED WITH AN
	AMENDMENT ALTERING ONE DEBTOR NAME.
	SECURED PARTY INFORMATION WAS RECEIVED WITH
	AN AMENDMENT ALTERING DEBTOR INFORMATION.
	MULTIPLE SECURED PARTY NAMES WERE RECEIVED
	FOR AN AMENDMENT (SECURED PARTY CHANGE OR
	DELETE).
	FAILURE TO PROVIDE CURRENT NAME FOR
	AMENDMENT (SECURED PARTY CHANGE OR DELETE).
	CURRENT NAME INFORMATION WAS RECEIVED WITH
	AN AMENDMENT (SECURED PARTY ADD).
	MULTIPLE CURRENT NAMES WERE RECEIVED WITH AN
	AMENDMENT ALTERING ONE SECURED PARTY NAME.
	DEBTOR INFORMATION WAS RECEIVED WITH AN
	AMENDMENT ALTERING SECURED PARTY
	INFORMATION.
	MULTIPLE DEBTOR NAMES WERE RECEIVED FOR AN
	AMENDMENT (DEBTOR PARTY CHANGE OR DELETE).
	MORE THAN ONE CONTINUATION EXIST FOR THE SAME
	OBLIGATION IN THIS BATCH
	FAILURE TO PROVIDE A VALID AMENDMENT ACTION
	FAILURE TO PROVIDE VALID NUMBER OF SECURED
	PARTIES AND/OR ASSIGNORS FOR ASSIGNMENT
	CONTACT CUSTOMER SERVICE, MOVE TO PERM FAILED

¹ Code GF10 (Other) has been expanded by the State of New York and will include the textual description of the reason for rejection.